



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE  
COVER PAGE

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

FILED  
05 MAR 24 PM 2:37  
CLERK

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3. This Statement covers From: <u>10</u> <u>18</u> <u>04</u> to <u>11</u> <u>22</u> <u>04</u> Mo Day Year Mo Day Year	
1. Committee I.D. Number <u>137467</u>	4. Candidate Last Name <u>ROCCA</u> First Name <u>FRANK</u> M.I. <u>A.</u>
2. Committee Name <u>TNE FRANK ROCCA ELEC.</u> <u>COMM.</u>	4a. Office Sought Including District # or Community Served (If applicable)
5. Committee's Mailing Address  Area Code and Phone _____ If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	4b. County of Residence
6. Treasurer's Name & Residential Address  Area Code & Phone ( ) _____	
7. Treasurer's Business Address  Area Code and Phone ( ) _____	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)  Area Code and Phone ( ) _____

9. TYPE OF STATEMENT  9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election  Pre-Election or Post-Election Statement relates to:  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus  Month Day Year	9c. <input type="checkbox"/> Annual Statement ( ) Coverage Year  9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)  9e. <input type="checkbox"/> Dissolution of Candidate Committee  Effective Date of Dissolution  Month Day Year  By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
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A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper <u>JULIANNE ROCCA</u> Type or Print Name	<u>Jul</u> Signature	Date	Mo Day Year
Candidate <u>FRANK A. ROCCA</u> Type or Print Name	<u>Frank C. Rocca</u> Signature	Date	<u>03</u> <u>24</u> <u>05</u> Mo Day Year



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number

137467

2. Committee Name

THE FRANK ROCCA

ELECTION COMM.

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Itemized Contributions (Schedule 1A - Column 6)	(3.) \$ _____	(18.) \$ 3,500
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 + Line 4)	(5.) \$ _____	(20.) \$ 3,500
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ _____	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ _____	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _____	(23.) \$ 3,644.36
<b>INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)</b>		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 177.33	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ _____	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ 177.33	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ 116.19	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 61.14	

\*If your ending balance is negative, please recheck your math.